



Address:

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FILING/RECEIPT DATE NUMBER

FIRST NAMED APPLICANT

ATTORNEY DOCKET NO./TITLE

09/378,608

508/20/99

65365-0009

JAMES F KAMP RADER FISHMAN & GRAUER PLLC 1533 N WOODWARD SUITE 140 BLOOMFIELD HILLS MI 48304

NOT ASSIGNED

1744

DATE MAILED:

09/14/99

NOTICE TO FILE MISSING PARTS OF APPLICATION Filing Date Granted

An Application Number and Filing Date have been assigned to this application. The items indicated below, however, are missing. Applicant is given TWO MONTHS FROM THE DATE OF THIS NOTICE within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of

| for a | small entity in co | of items 1 or 3 thr ompliance with 37 oid abandonment. | ough 5 are indicated as missin CFR 1.27, or \$130.00 for a | g, the SURCHARGE so non-small entity, mu | et forth in 37 CFR 1.16(e) of ☐ st also be timely submitted |] \$65.00 in reply |
|---|--|--|---|---|--|-----------------------|
| If all i | required items of | on this form are f ment filed) 🏻 no | iled within the period set abo | ove the total amount | owed by applicant as a | |
| □ 1. | The statutory b ☐ missing. ☐ insufficient. | | , , | | | · , |
| 2 . | Applicant must claiming such s | | ?7). | basic filing fee and/or | file a small entity statemen | t = |
| • | \$ | for | total claims over 20. | | | |
| | \$ | for | independent claims ov | er 3. | | |
| \mathbf{M}^{-1} | • • | t either submit the | lependent claim surcharge. e additional claim fees or cance | l additional claims for | which fees are due. | |
| 3. | An oath or deci | yunsigned. over the newly sub laration in complia | omitted items. Ince with 37 CFR 1. 63, includio Ind Filing Date is required. | ng residence informati | on and identifying the applic | cation by |
| · . — | The signature(s 1.43 or 1.47. A properly sign Application Num | s) to the oath or de ed oath or declara mber and Filing Da | eclaration is/are by a person of ation in compliance with 37 CFI ate, is required: t inventor(s) is missing from the | R 1.63, identifying the | | R 1.42, |
| • | inventor(s), ide | ntifying this applic | nce with 37 CFR 1.63 listing thation by the above Application | Number and Filing Da | nte, is required. | d |
| 6. A \$50.00 processing fee is required since your check was returned without payment (37 CFR 1.21(m)). 7. Your filing receipt was mailed in error because your check was returned without payment. 8. The application was filed in a language other than English. Applicant must file a verified English translation of the application, the \$130.00 set forth in 37 CFR 1.17(k), unless previously submitted, and a statement that the translation is accurate (37 CFR 1.52(d)). 9. OTHER: | | | | | | 180013 09378608 |
| | | ny questions abou | t this notice to "Attention: Box | Missing Parts " | | |
| Direc | | | this notice <u>MUST</u> be | | e reply. | 00000081 65.00 CH |
| | omer Service Ce Patent Examina | nter tion Division (703) |) 308-1202 | | | 99 TLUU11 |

FORM PTO-1533 (REV. 9/98)